

# REQUEST FOR RECORDS

KANSAS REAL ESTATE COMMISSION  
THREE TOWNSITE PLAZA, SUITE 200  
120 S.E. 6TH AVE.  
TOPEKA, KS 66603-3511  
(785) 296-3411 phone  
(785) 296-1771 fax  
(Please print or type)

I, \_\_\_\_\_  
(Individual's Name)

an authorized agent of \_\_\_\_\_  
(Firm's Name)

pursuant to K.S.A. 45-220, do hereby certify that:

1. I will not use the list of names and addresses contained in or derived from the requested public record for the purpose of selling or offering for sale any property or service to any person or firm who resides at any address listed; or

2. I shall not sell, give or otherwise make available to any person or firm any list of names and addresses contained in or derived from the requested public records or information for the purpose of allowing that person or firm to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed.

I will use the information for the purpose of: \_\_\_\_\_

\_\_\_\_\_  
(A sample of any mailing to be used must be attached in order to process your request)

I understand that I will be contacted with the total cost of this information and my request will be generated upon the commission's receipt of payment of that total cost.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Address

## REQUEST FOR RECORDS FORMAT

Complete below to set out the information requested and the format you would like that information provided in. If you would like more information than is provided below, indicate specifics under SPECIAL REQUEST. Upon approval of your request, you will be contacted with the total cost of the list. Upon the commission's receipt of this total, the request will be generated and e-mailed to you.

### **ADDRESS OF LIST PROVIDED**

LICENSEE RESIDENCE ☐

LICENSEE BUSINESS ☐

### **SPECIAL REQUESTS:**

REQUESTED BY: \_\_\_\_\_

DAYTIME PHONE NO. ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_